

This procedure is followed for enrolled children with diagnosed medical condition(s). Please ensure all stakeholders understand the initial and ongoing responsibilities as listed in this procedure

The centre Director, Responsible Person in Charge (RPIC) or approved delegate will share this infographic with families to communicate parent/guardian responsibilities.



Supporting Children with Medical Conditions at C&K

We strongly believe that all children have the right to experience quality education and care in a safe, protective, and healthy learning environment.

If your child has a diagnosed medical condition, such as Asthma, Anaphylaxis, Epilepsy or Diabetes (just to name a few), we will work together with you to support their medical needs when they attend our centre.

Our Medical Conditions Procedure lists the steps we follow to support your child's medical needs, and meet all required compliance obligations.

Please note, if your child has a diagnosed medical condition, the following steps must be completed BEFORE your child starts at the centre or, if they are already attending, their enrolment will be PAUSED until the steps are completed.

- 

Please provide a current medical management plan that has been prepared, dated and signed by your child's doctor (completed within the last 6 months).
- 

Meet with your child's teacher to develop a risk minimisation plan.
- 

Allow enough time for staff who volunteer to undergo extra training if your child has a specialised health procedure that they need to learn about (such as diabetes, tube feeding or tracheostomy care).
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Please provide us with your child's current medication and/or specialised equipment.
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Let us know immediately if anything changes about your child's diagnosis, medical management plan, medication or medical situation.
- 

Your Centre Director will arrange a meeting with you to review your child's medical management plan every 6 months.

Parent/Guardian Responsibilities

When you complete an Enrolment Booklet/Online Form

- Indicate if your child has a medical condition and if your child requires long term medication and/or a specialised health procedure to be administered when they attend the centre.
- Provide copies of the following documents with the completed Enrolment Booklet/Online Form:
 - Current Medical Management Plan (this may also be called Medical Action Plan or Emergency Action Plan) prepared and authorised by a registered medical practitioner (their name, signature and date). This document must be no more than 6 months old* from child's commencement date at the centre.
 - Specialist Reports (if applicable).
- In addition to yourself, provide the details of at least two Additional/Emergency Contacts.

Providing a Medical Management Plan is
*Education and Care Services National
Regulation requirement - Reg. 90*

*Medical Management Plans for non-complex medical conditions that are current (determined by registered medical practitioner) but older than 6 months from a child's commencement date may be accepted upon consideration of the Director and consideration and written approval (via email) of the C&K Early Childhood Education Manager/Committee.

Before starting at the Centre

- Meet with the centre Director and together you will complete a *Medical Condition Record* and develop a risk minimisation plan for your child.
- Understand your child's commencement date may be delayed until all steps of procedure are completed.

Each day your child attends the Centre/throughout your child's enrolment

- You must supply all items listed in your child's Medical Management Plan including (if applicable):
 - **Medication** – written instructions from a registered medical practitioner (pharmacy label) with your child's name and prescribed dosage, with adequate supply, that has not expired.
 - **Specialist equipment** (in good working order).
- Complete a *Medication Authorisation Record* (if applicable) and any other documentation requested by the Centre.
- Share any information about your child's current health needs and medical condition that will help teachers/educators the best support for your child that day.
- Let the centre know immediately if you or your *Nominated Additional/Emergency Contact* details change.
- Every six months meet the centre Director to discuss/review your child's health needs, medical condition and risk minimisation plan.
- Every 18 months provide a new Medical Management Plan authorised by a registered medical practitioner and meet the centre Director to complete a new Medical Condition Record for your child.

When your child's diagnosis, medication, specialised health procedure or medical documentation changes

- Meet with the centre Director to provide an update on your child's changing needs.
- Provide new or updated information (in writing) to support the change. For example:
 - Medical Management Plan
 - Specialists Reports
 - Medication
 - Specialised equipment.
- If your child is no longer suffering AND is no longer receiving medical treatment for a previously diagnosed medical condition, advise the centre in writing.

Centre Director/Responsible Person in Charge (or approved delegate) Responsibilities

When a new Enrolment Booklet/Online Form is received

- Sight and review all enrolment records when received to:
 - Check all fields have been completed by parents/guardians.
 - Identify children with medical conditions and commence this procedure.
- Create a Medical Condition Record or a Complex Medical Condition Record for each child with a diagnosed, current medical condition and file in 'Medical Conditions Folder'.
- Immediately inform your Early Childhood Pedagogy Advisor (ECPA), if a child has the following complex medical conditions and/or requires the following specialised health procedures to be performed at the centre:
 - Diabetes management and care tasks
 - Epilepsy management and care tasks
 - Percutaneous Endoscopic Gastrostomy (PEG) tube management and care tasks
 - Tracheostomy management and care tasks
 - Stoma management and care tasks
 - Rectal Suppository
 - Urinary catheter management and care tasks

Sighting health information in enrolment records is an *Education and Care Services National Regulation* requirement – Reg 162

A Medical Condition Record/Complex Medical Condition Record is completed:

- When a child has a current medical condition diagnosed by a registered medical practitioner.
- Prior to a child commencing OR immediately after a new diagnosis of an enrolled child.
- Every 18 months.

A Medical Condition Record/Complex Medical Condition Record is updated:

- When new or additional information relating to the medical condition is provided.

A Medical Condition Record/Complex Medical Condition Record is NOT required if:

- A child's condition has not been diagnosed by a registered medical practitioner.
- A child no longer has the medical condition AND is no longer being treated for the medical condition by a registered medical practitioner.
- A child's diagnosis relates to their learning and development such as global developmental delay, autism, hearing impairment etc. However, if child has a medical condition diagnosed by a registered medical practitioner in addition to their learning and development diagnosis, the Medical Condition Record must be completed e.g. child has global developmental delay and Epilepsy.

Before a new child commences at centre OR

Immediately after a new or changed diagnosis of an enrolled child

- Schedule a face to face/online meeting with the child's parent/guardian.
- Meet with child's parent/guardian:

Meeting agenda

1. Discuss child's medical diagnosis, medical management plan, what is required to support the child attending the centre and if applicable medication and specialised health procedures.
2. Provide a copy of this procedure and if applicable, the relevant medical condition guideline i.e. Anaphylaxis and Allergies, Asthma, Diabetes, and Epilepsy and Seizures.
3. Discuss the required consents and ask them to complete Parent/Guardian Acknowledgment and Authorisation in their child's Medical Condition Record/Complex Medical Condition Record.
4. Undertake a review of child's Medical Management Plan to ensure the document contains the required details (as per appendix 1 of this procedure). If any detail is missing, ask parent/guardian to obtain an amended Medical Management Plan from a registered medical practitioner.
5. Discuss and develop a Risk Minimisation Plan (contained in the Medical Condition Record/Complex Medical Condition Record). Include specific risk minimisation strategies to address the child's medical condition and individual health needs. Do not leave this section blank. If applicable and relevant, refer to Guideline (Anaphylaxis and Allergies, Asthma, Diabetes and Epilepsy and Seizures) for risk minimisation strategy examples.

In the child's Medical Condition Record/Complex Medical Condition Record:

- Record date and time of meeting.
- Tick items as discussed with parent/guardian.
- Record any additional, new or changed information provided by the parent/guardian.
- Scan and upload child's Medical Condition Record/Complex Medical Condition Record child's Kidsoft record under the Document Type. Refer to appendix 3 of this procedure for document saving conventions.

- Store hard copy of child's *Medical Condition Record/Complex Medical Condition Record* in 'Medical Conditions Folder'. Centres are encouraged to attach a copy of the child's current medical management plan to their *Medical Condition Record/Complex Medical Condition Record*.
- Archive out of date medical documentation in child's Kidsoft record when replaced with uploaded newer versions.
- If requested, provide parent/guardian with a copy of their child's completed *Medical Condition Record/Complex Medical Condition Record*.

Seek support from your Early Childhood Pedagogy Advisor

- Immediately contact your ECPA if:
 - a medical management plan is unclear and/or difficult to follow.
 - the child has one or more complex medical conditions.
 - the child requires a specialised health procedure to be performed when they attend the centre.
- Branch centres only - Your ECPA can provide support including:
 - obtaining advice from a registered medical practitioner.
 - requesting a Wellbeing Inclusion Advisory Group (WIAG) meeting.
 - arranging training for teacher/educator volunteers

Implement Communication Plan

- Prior to child commencing or an enrolled child returning to the centre, inform the team (teachers, educators including casuals) (and if applicable administrative staff, students, and volunteers) of child's medical management plan, risk minimisation plan (included in the *Medical Condition Record/Complex Medical Condition Record* and if applicable, location of medication and specialist equipment. Document this communication e.g., email, memo, meeting minutes and/or Storypark post.
- Update induction material for permanent and casual educators with a copy of child's Medical Management Plan and Risk Minimisation Plan.
- Instruct all teachers/educators to read and complete the risk minimisation plan acknowledgement table. New permanent educators to acknowledge (sign/date) the risk minimisation plan in child's Medical Condition Record stored in the Medical Conditions Folder. Casual educators to acknowledge (sign/date) the risk minimisation plan contained in the casual induction folder
- If appropriate and only if approved by and in consultation with child's parents/guardians, sensitively share relevant information about child's medical condition with centre children and families.
- Display child's medical management plan in a prominent location(s) and when applicable display:
 - "*Medication Stored Here*" sign where medication and a copy of medical management plan are stored.
 - "*Child with anaphylaxis currently enrolled at this centre*" sign in centre foyer/entrance in a visible location for teachers/educators, families and visitors.
- Continue to implement communication plan throughout the child's enrolment by setting reminders via Kidsoft OR Outlook and/or [Medical Conditions Communication Calendar](#) (optional) to ensure important communication tasks are completed:
 - Every 6mths (or whenever a significant change has been made to child's medical management plan):
 - Facilitate a face to face/online meeting with child's parents/guardians. At this meeting, discuss and review child's medical management plan and *Medical Condition Record/Complex Medical Condition Record* (including child's risk minimisation plan).
 - Complete medical emergency scenario training at team meeting.
 - Medication Expiry – Remind parents/guardians to purchase new medication prior to expiry date.
 - Every 18mths - Seek and obtain a new Medical Management Plan authorised by a registered medical practitioner AND complete a new *Medical Condition Record/Complex Medical Condition Record* in consultation with child's parent/guardian.
- Note key communications in child's *Medical Condition Record/Complex Medical Condition Record*.

Implementing a communication plan is an Education and Care Services National Regulation requirement - Reg. 90

Complex medical conditions and specialised health procedures

For the purposes of this C&K procedure, the following are considered complex medical conditions and specialised health procedures:

- Diabetes management and care tasks
- Epilepsy management and care tasks
- Percutaneous Endoscopic Gastrostomy (PEG) tube management and care tasks
- Tracheostomy management and care tasks
- Stoma management and care tasks
- Rectal Suppository
- *Urinary catheter management and care tasks

**Please note: Due to the nature of the procedure and risk of infection, teachers/educators cannot perform catheter care tasks. Alternative arrangements must be arranged between C&K/Centre and the child's parent/guardian, whereby the parent/guardian (or their authorised delegate) attends the centre to perform catheter care tasks.*

Upon enrolment and prior to a child's commencement:

- Inform parents/guardians that their child's commencement date may be delayed until volunteers are sought and teachers/educators complete training. If an enrolled child is newly diagnosed with a complex medical condition, ensure their parent/guardian understands the child's enrolment must be paused until volunteers are sought and teachers/educators complete training OR an acceptable solution is arranged between C&K and the child's parent/guardian.
- In Kidsoft, under '*Medical Condition Type*', appropriately 'tag' children who have complex medical conditions and/or require specialised health procedures as listed on previous page.
- Determine if any teachers/educators are willing to volunteer to manage the health needs of a child with a complex medical condition and/or perform a specialised health procedure.
 - Kindergartens require a minimum of 2 teacher/educator volunteers.
 - Childcare and extended kindergarten programs require more than 2 teacher/educator volunteers to ensure there is at least 1 volunteer rostered when child is present at the centre.
- Immediately inform your ECPA or Committee if your centre will/does not have an adequate number of teacher/educator volunteers. An alternative, acceptable solution must be arranged which may include the child's parent/guardian or their authorised delegate attending the centre to manage their child's complex health needs and/or perform a specialised health procedure.
- Ensure teacher/educator volunteers complete required training as outlined in Appendix 2 of this procedure.
- Once training has been completed:
 - Ask teacher/educator volunteers to complete, sign and date the teacher/educator volunteer section on the child's *Complex Medical Condition Record*.
 - Scan and email evidence of training to ld@candk.asn.au.
 - Scan and upload to child's Kidsoft record under the Document Type (Refer to appendix 3 of this procedure for document saving conventions):
 - Updated *Complex Medical Condition Record*.
 - Evidence of training
 - Store hard copy of updated *Complex Medical Condition Record* in 'Medical Conditions Folder'.
 - Store hard copies of training records in centre staff file and update staff schedule.
- Teachers/educators who no longer wish to volunteer are requested to provide at least 2 weeks written notice to the centre Director/Manager or Committee to allow sufficient time to organise an alternative solution to support the child's health care needs.

Risk Minimisation Plan

- In consultation with child's parent/guardians and (if possible) medical specialists, develop and document a risk minimisation plan (in the child's *Medical Conditions Record*) that details hazards, risks and strategies relevant to child's health needs. If available, refer to relevant Guideline (i.e. [*Anaphylaxis and Allergies*](#), [*Asthma*](#), [*Diabetes*](#) and [*Epilepsy and Seizures*](#)) for specific risk minimisation strategies. This section of the risk minimisation plan cannot be left blank.
- If child has multiple medical conditions and/or specialised health procedures, the risk minimisation plan must include strategies for all conditions and procedures i.e. one risk minimisation plan can address more than one medical condition and specialised health procedure.
- Every 6 months, review and (if needed) update the risk minimisation plan in consultation with child's parents/guardians. Update revision record table in the risk minimisation plan accordingly. Whenever the risk minimisation plan is updated, ensure all teachers/educators review and understand changes made and complete the acknowledgement table. Replace/add a copy of updated risk minimisation plan in induction material.
 - New permanent educators to acknowledge (sign/date) the risk minimisation plan contained in a child's *Medical Condition Record/Complex Medical Condition Record/Medical Conditions Folder*.
 - Casual educators to acknowledge (sign/date) the risk minimisation plan contained in the casual induction folder.

The development of a risk minimisation plan in consultation with child's parents/guardians is an Education and Care Services National Regulation requirement - Reg. 90

Inclusion funding for children with medical conditions

- Kindergartens only - A kindergarten may be eligible to apply for Kindergarten Inclusion Support Subsidy (KISS) if a kindergarten aged child with a complex medical condition requires specialised support to access and participate in the program.
- If eligible, complete an online [*C&K KISS Inclusion Form*](#):
 - Current kindergarten year - complete ASAP to September.
 - Following kindergarten year - complete when application process starts.
- Childcare Centres and Extended Kindergarten Programs only - When child with a medical condition requires additional support to access and participate in the program, contact your ECPA.

Everyday responsibilities

- Ensure all teachers/educators maintain current first aid, asthma and anaphylaxis and CPR qualifications.
- Monitor and support teachers/educators including casuals (and when applicable students and volunteers) understanding of and compliance with this procedure and individual child medical condition requirements, medical management plan and risk minimisation strategies.
- Ensure at least one trained teacher/educator volunteer is rostered manage the health needs of a child with a complex medical condition and/or perform a specialised health procedure. If this is not possible, seek the immediate advice of your ECPA or Committee. An alternative solution must be arranged which may include the parent/guardian or another person authorised by the parent/guardian to attend the centre to perform the specialised health procedure.

Teacher/Educator Responsibilities

- Maintain current first aid, asthma and anaphylaxis and CPR qualifications at all times. Once qualifications are received:
 - Provide a copy to centre Director for your centre staff file.
 - Scan and email copy to ld@candk.asn.au (branch employees only).
- Read, understand and consistently implement children's medical management plans and risk minimisation plans.
- Support colleague (including casuals) understanding and implementation of children's medical management plans and risk minimisation plans.
- Actively seek the support of your colleagues, centre Director/RPIC and C&K management and advisory personnel to implement children's medical management plans and risk minimisation plans.
- Maintain open and regular communication with parents/guardians regarding children's health needs and medical conditions.
- Immediately inform your centre Director/RPIC if a parent/guardian indicates the management of their child's medical condition has changed.
- Ensure medication and medical equipment supplied by parents/guardians is consistent with child's medical management plan.
- Undertake a weekly audit of medication expiry dates via the [Daily Indoor Outdoor Safety Checklist](#). Promptly notify parent/guardian when medication is 6 weeks prior to expiry.
- Consider and plan for children's health needs and medical conditions during curriculum activities, incursions, excursions and emergencies. When required and in consultation with parents/guardians and the centre Director, update risk minimisation plans.

Immediately notify a parent/guardian if the supplied medication does not contain a pharmacy label showing the child's name and dosage required, there is insufficient quantity of medication to administer the required dose, and/or the medication has expired

Do not administer any medication or use medical equipment that is not specified or is inconsistent with child's medical management plan

Do not perform a specialised health procedure that you are not approved, authorised and/or trained to perform and/or if your first aid, CPR, asthma and anaphylaxis qualifications are not current

Early Childhood Education Managers and Early Childhood Pedagogy Advisors responsibilities

- Regularly contact and support centres who have a child(ren) enrolled with a complex medical condition(s).
- Closely monitor centre procedural compliance and teacher/educator understanding and implementation of medical management and risk minimisation plans.

**Approach non-compliance as a serious breach of legislation and C&K procedure.
Prioritise non-compliance and ensure the centre takes immediate action.
Director is required to email evidence of remedied non-compliance to you by a nominated due date.**

Appendix 1 – Definitions

Medical condition	A current medical condition formally diagnosed by a registered medical practitioner
Medical management Plan (MMP)	<p>A plan developed and authorised by a registered medical practitioner outlining the necessary information and instructions to appropriately care for a child with a medical condition. The plan must include:</p> <ul style="list-style-type: none"> • child's first name and surname • a recent photograph of child • name of medical condition • daily management tasks • possible signs/symptoms or description of medical condition • any first aid and/or emergency treatment of medical condition • if applicable details of required medication i.e. name, frequency, dosage, method (and any possible side effects) • authorising registered medical practitioner name, signature and date authorised. <p>An MMP may be in a format provided by the registered medical practitioner (e.g. a letter), or by a peak body (e.g. the National Asthma Council Australia's Asthma Action Plan) or using a C&K MMP template (available on the website). As long as the MMP contains the required information, any format is acceptable.</p>
Registered medical practitioner	A person who is registered with the Australian Health Practitioner Regulation Agency (AHPRA) as a health or medical professional (other than as a student) under the Health Practitioner Regulation National Law Act 2009 (Qld) e.g. general practitioner (GP), medical specialist or credentialed diabetes educator.
Complex medical condition	<p>The criteria for defining medical condition complexity include illness severity, degree of impairment, the presence of multiple co-occurring medical conditions and the need to perform specific care management tasks (i.e. specialised health procedures). Examples include (but are not limited to) diabetes, epilepsy and any medical condition or impairment that requires peg/tube feeding, tracheostomy care and stoma care.</p> <p>Asthma and Anaphylaxis are not considered complex medical conditions.</p>
Specialised health procedure	<p>A specialised health procedure is a task performed to care for a child with a complex medical condition. Examples include (but are not limited to), blood glucose and ketone monitoring, administration of medication via injection (except EpiPen), peg/tube feeding, tracheostomy care and stoma care.</p> <p>Due to the nature of the procedure and risk of infection, teachers/educators cannot perform catheter care tasks. Alternative arrangements must be arranged between C&K and the child's parent/guardian, whereby the parent/guardian (or their authorised delegate) attends the centre to perform catheter care tasks.</p>
Wellbeing and Advisory Group Meeting (WIAG)	For the purposes of this procedure, a WIAG meeting is initiated by an Early Childhood Pedagogy Advisor (ECPA) to review the inclusion needs of a child with significant complex medical needs. The meeting must occur prior to the child's commencement date or immediately after a new or changed diagnosis of an enrolled child. The WIAG is chaired by the Manager, Wellbeing and Inclusion and includes the relevant Regional Manager, Early Childhood Pedagogy Advisor, Early Childhood Education Manager/Consultant, Centre Director and Teacher, Quality and Regulation Manager, Workplace Health and Safety and Legal, Risk and Governance team representative.

Appendix 2 – Training requirements for teacher/educator volunteers

Who?

- Teachers/educators willing to volunteer to manage the health needs of a child with a complex medical condition and/or that requires a specialised health procedure (to be performed whilst attending a centre), must complete appropriate training.
- Training must be delivered by an appropriately qualified health professional or trainer from a recognised organisation and/or medical condition peak body.
- Branch centres - Your Early Childhood Pedagogy Advisor will source and arrange training and will contact the C&K Learning and Development Team when there is the need for group training. Cost of training is charged back to centre budgets or may be covered by KISS inclusion funding.
- Teachers/educators (permanent or relief) are not permitted to manage the health needs of a child with a complex medical condition or to perform a specialised health procedure unless they have:
 - Current First Aid, Asthma and Anaphylaxis and CPR qualifications
 - Completed training as detailed in this appendix (2) AND
 - Completed the *Volunteers section* of a child's *Complex Medical Condition Record*.

When?

- Training must be completed prior to a child commencing at a centre/or immediately upon diagnosis of an enrolled child.
- The theory component of the training is then completed annually whilst a child with complex medical condition is enrolled. The practical component of the training is then completed when a significant change is made to child's medical management plan and/or the specialised health procedure.

What?

- The following table outlines the 'theory' and 'practical' training requirements for specific complex medical conditions and/or specialised health procedures.

Complex Medical Condition(s) / Specialised Health Procedure(s)	Training Requirements	
	Theory	Practical
Diabetes management and care tasks	YES	YES
Epilepsy management and care tasks	YES	Not required
Epilepsy management and care tasks including the administration of Midazolam	YES	YES
Percutaneous Endoscopic Gastrostomy (PEG) tube management and care tasks	YES	YES
Tracheostomy management and care tasks	YES	YES
Stoma management and care tasks	YES	YES
Urinary catheter management and care tasks	Educators cannot volunteer to perform/no training	

- Theory training content must include:
 - What is the complex medical condition?
 - Everyday management
 - What is the specialised health procedure, including all steps and actions required?
 - Possible signs, symptoms and/or triggers
 - Treatment including medication (administration and storage)
 - Emergency actions/first aid
- Practical training content must include:
 - Practical understanding of and the actions to implement a child's individual medical management plan and specialised health procedure(s).
 - Trainer assessing the competency of the teacher/educator volunteer through observing the volunteer performing the specialised health procedure(s).

Appendix 2 – Training requirements for teacher/educator volunteers (continued)

Relevant peak bodies, key contacts and training options

Complex Medical Condition(s) / Specialised Health Procedure(s)	Peak Body/ Key Contacts	Training Options	
		Theory	Practical
Diabetes management and care	<ul style="list-style-type: none"> Diabetes Queensland Child's nominated Credentialed Diabetes Educator 	<ul style="list-style-type: none"> Diabetes Queensland – "Practical Diabetes for Childcare Educators" online, 2 hours, free 	<ul style="list-style-type: none"> Credentialed Diabetes Educator (fee for service)
Epilepsy management and care tasks	<ul style="list-style-type: none"> Child's Medical Practitioner Epilepsy Queensland 	<ul style="list-style-type: none"> Epilepsy Queensland - "Understanding and Managing Epilepsy" Face to face or via Zoom 	Not required
Epilepsy management and care tasks including the administration of Midazolam	<ul style="list-style-type: none"> Child's Medical Practitioner Epilepsy Queensland 	<ul style="list-style-type: none"> Epilepsy Queensland - "Understanding Epilepsy" Face to face or via Zoom Akadia (Toowoomba) – "Epilepsy and Midazolam" 	<ul style="list-style-type: none"> Epilepsy Queensland - "Understanding Epilepsy + Administration of Midazolam' training" Face to face or via Zoom
Percutaneous Endoscopic Gastrostomy (PEG) tube management and care tasks	<ul style="list-style-type: none"> Child's Medical Practitioner/Chronic Care Nurse Queensland Children's Hospital 	<ul style="list-style-type: none"> Mater Education Face to Face - "Gastrostomy Tube Feeding and Management" - Delivery outside Brisbane at a venue provided by the client, will incur travel and accommodation costs. Akadia (Toowoomba) – "Peg Feeding" 	Theory + Practical <ul style="list-style-type: none"> Allens Training – "Enteral Feeding and Management" Chronic Care Nurse
Tracheostomy management and care tasks	<ul style="list-style-type: none"> Child's Medical Practitioner/Chronic Care Nurse Queensland Children's Hospital 	<ul style="list-style-type: none"> Theory + Practical - Queensland Children's Hospital health practitioner or Chronic Care Nurse 	
Stoma management and care tasks	<ul style="list-style-type: none"> Child's Medical Practitioner/ Chronic Care Nurse Queensland Stoma Association 	<ul style="list-style-type: none"> CQ University - Stoma Management – Basic Stoma Care PDC20104 (online) 	Theory + Practical <ul style="list-style-type: none"> Allens Training - "Course in Stoma Care" Child's Chronic Care Nurse

Appendix 3 – Storage of medical documentation

- Scan and upload the following documents to the child's Kidsoft record under 'Documents using the following saving conventions.
- Archive documents on Kidsoft when documents are updated, or new documents are created/provided.

Document	Saving convention
Current Medical Management Plan (also known as emergency action plan or medical action plan)	yearmonthdate MMP childfirst surname e.g. 20220728 MMP Sue Smith yearmonthdate is the plan date
Current Medical Condition Record or Complex Medical Condition Record	yearmonthdate MCR childfirst surname e.g. 20220728 MCR SueSmith yearmonthdate is the date the document was finalised
Current training records/certification of each teacher/educator volunteer	yearmonthdate VTR volunteerfirst surname e.g. 20220728 VTR SueSmith yearmonthdate is the date the training was completed
Other current medical documents provided by child's parents/guardians	yearmonthdate OMR documenttype 20220728 OMR Specialist Report yearmonthdate is the date specified in the document provided, if no date on the document, use the date provided by parent/guardian